



# SAFER SCHOOLS AND CAMPUSES BEST PRACTICES CLEARINGHOUSE

- Lessons from the Field -

## ***Expanding School-Health Center Partnerships***


MARCH 30, 2022  
3:00-4:30PM ET





# NCSSLE Website

[HTTPS://SAFESUPPORTIVELEARNING.ED.GOV](https://safesupportivelearning.ed.gov)

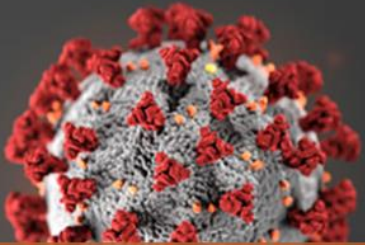


**National Center on Safe Supportive Learning Environments**  
Engagement • Safety • Environment

About 🔍


SCHOOL CLIMATE IMPROVEMENT ▾ TOPICS ▾ EVENTS ▾ RESOURCES ▾ TA SERVICES ▾ STATE PROFILES

RESOURCE




Plan, Prepare, and Respond to the Coronavirus

TOOLKIT




Leverage Reset Opportunities to Help Students and Staff Thrive

REPORT




Take Action and Protect Youth Mental Health

GUIDE



Support the Safety of In-Person Learning for Students and Staff

REPORT



Learn About Students' Experiences with Bullying and Hate Crimes

## FEATURED EVENTS

UPCOMING



Fortifying the Work: Towards Anti-Oppressive Practices for Early Career Teachers  
February 10, 2022 - 3:00 PM EST

MORE

PAST



Webinar: Role of Community Engagement Specialists  
January 27, 2022 - 1:00 PM EST

MORE

PAST



Human Trafficking Webinar Series: Effective Engagement of Individuals with Lived Experience  
January 26, 2022 - 3:00 PM EST

MORE



School Climate Improvement Resource Package



ED School Climate Surveys



Trauma-Sensitive Schools Training Package



Building Student Resilience Toolkit



Human Trafficking in America's Schools



Improving Higher Education Learning Environment



Supporting Trauma Recovery



Promoting Mental Health



Responding to Covid-19

To access information and archived materials from previous Lessons from the Field webinars, go to:  
<https://safesupportivelearning.ed.gov/lessons-field-webinar-series>





# Logistics

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Chat



Raise Hand



Q&A

Leave Meeting

## Technical Issues

For assistance during the webinar, please contact Shoshana Rabinovsky at [srabinovsky@air.org](mailto:srabinovsky@air.org).

This webinar is being recorded and will be archived at the following location:  
<https://safesupportivelearning.ed.gov/events/webinar/lessons-field-expanding-school-health-center-partnerships>



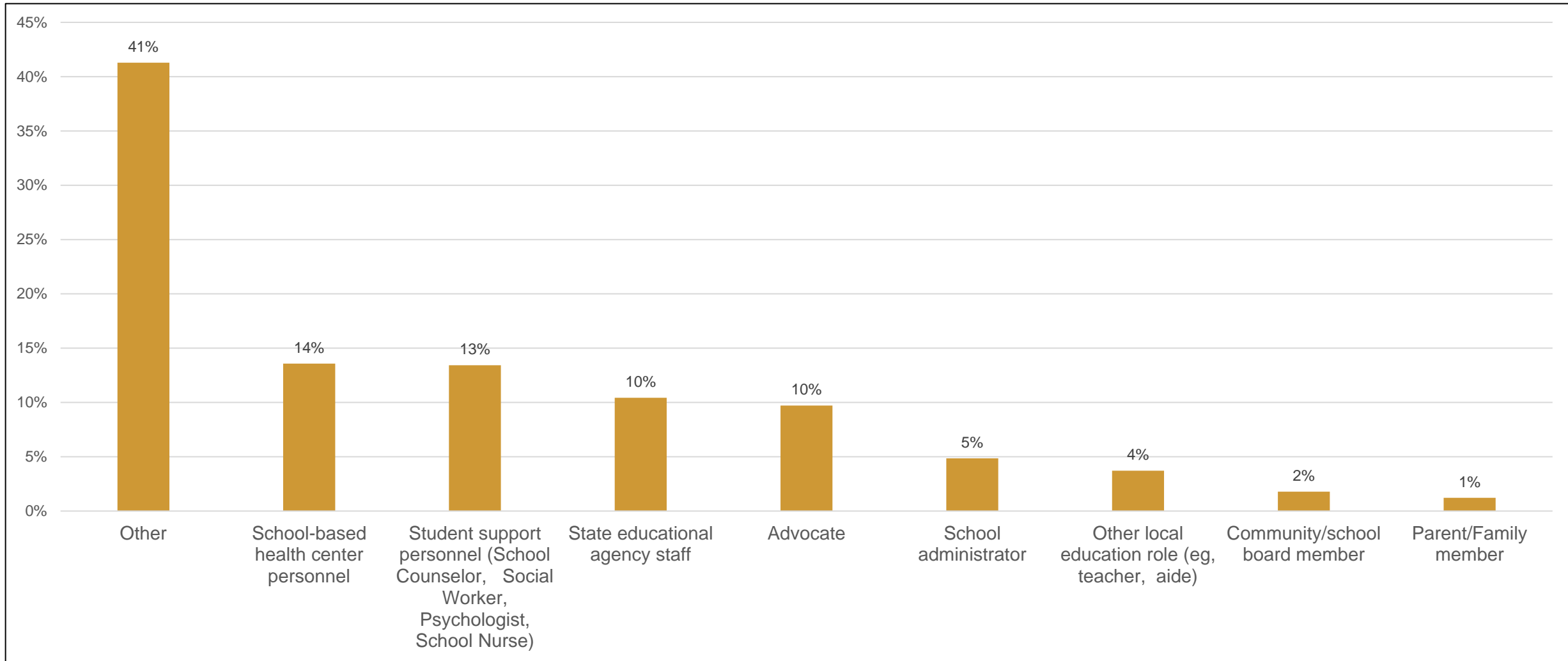
*The content of this presentation does not necessarily represent the policy or views of the U.S. Department of Education, nor does it imply endorsement by the U.S. Department of Education.*





# Registration Polling Question Results

WHAT BEST DESCRIBES YOUR ROLE?







# Agenda

- 1 Introduction and Logistics
- 2 Overview of Health Center Program and Model of Care: Jen Joseph
- 3 Benefits of School-Based Services for Schools, Students, and Families: Andrea Shore
- 4 Case Example 1: Blue Ridge Community Health Services, Inc. (NC): Tammy Greenwell & Matt Gruebmeier
- 5 Case Example 2: Cabin Creek Health Center, Inc. (WV): Jessica McColley
- 6 Resources to Support Next Steps: Andrea Shore
- 7 Questions and Answers
- 8 Closing Remarks





# Speakers

Jen Joseph

Director, Office of Policy and  
Program Development, Bureau of  
Primary Health Care, HRSA

Andrea  
Shore

Chief Program Officer, School-Based  
Health Alliance, SBHA

Tammy  
Greenwell

Chief Operations Officer, Blue Ridge  
Community Health Services, Inc., NC

Matt  
Gruebmeyer

Director of Student Services,  
Henderson County Public Schools,  
NC

Jessica  
McColley

Chief Medical Officer, Cabin Creek Health  
Center, Inc., WV

Bios for the speakers are archived at the following location:

<https://safesupportivelearning.ed.gov/events/webinar/lessons-field-expanding-school-health-center-partnerships>





# HRSA Health Center Program Overview

*Expanding School-Health Center Partnerships*

*March 30, 2022*

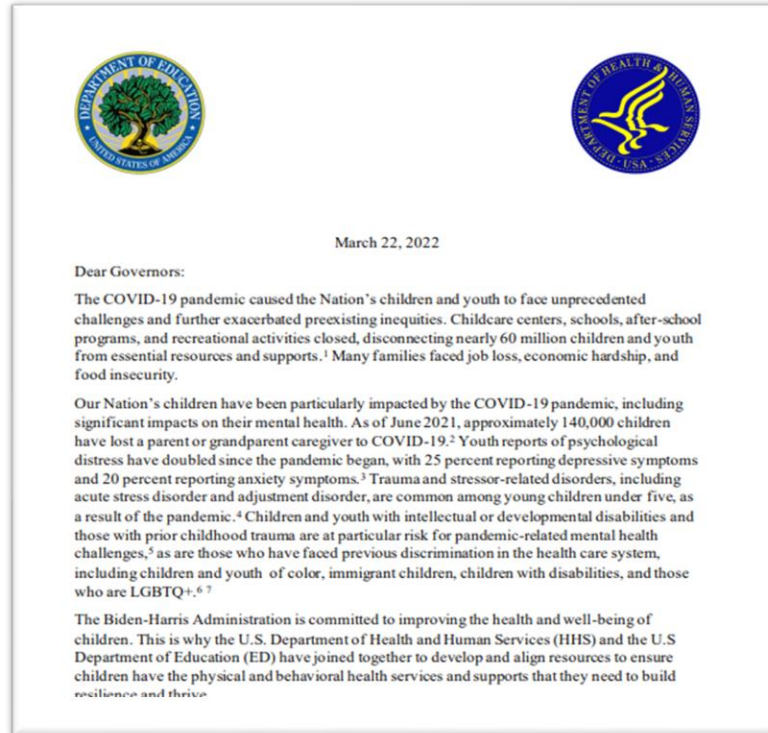
**Jen Joseph, PhD, MEd**  
**Director, Office of Policy and Program Development**  
**Bureau of Primary Health Care (BPHC)**

**Vision: Healthy Communities, Healthy People**





# U.S. Department of Health and Human Services (HHS) and the U.S Department of Education Coordinating and Aligning Resources



School-based Health Services – HHS Resources March 2022		
Name of Initiative or Tool	Short Description	Link
<b>Early Care and Education</b>		
A Resource Guide for Developing Integrated Strategies to Support the Social and Emotional Wellness of Children	This resource guide highlights strategies and provides information on how some Child Care and Development Fund grantees have leveraged partnerships and funding to support implementation. Topics include support for the social and emotional wellness of children, families, and providers; implementation considerations; social and emotional wellness initiatives and delivery strategies; promotion of social and emotional competence, as well as mental health, in infants and young children; and more.	<a href="https://childcareta.acf.hhs.gov/resource-guide-developing-integrated-strategies-support-social-and-emotional-wellness-children">https://childcareta.acf.hhs.gov/resource-guide-developing-integrated-strategies-support-social-and-emotional-wellness-children</a>
Child Care Health Consultation: Skill-Building Modules	Child care health consultants (CCHCs) can use these modules to explore six interactive, realistic scenarios to build and enhance consultation skills.	<a href="https://ecikc.ohs.acf.hhs.gov/health-services-management/article/child-care-health-consultation-skill-building-modules">https://ecikc.ohs.acf.hhs.gov/health-services-management/article/child-care-health-consultation-skill-building-modules</a>
Child Care Health Consultant Competencies	These competencies are for CCHCs working with early care and education (ECE) programs serving infants, toddlers, preschoolers, and school-aged children and their families. The competencies articulate the key areas of CCHC expertise. They demonstrate how CCHCs working in any ECE setting can apply their specialized knowledge and skills to improve health, safety, and wellness outcomes.	<a href="https://ecikc.ohs.acf.hhs.gov/publication/child-care-health-consultant-competencies">https://ecikc.ohs.acf.hhs.gov/publication/child-care-health-consultant-competencies</a>
Child Care Health Consultants Make Early Care and Education Programs Healthier and Safer	CCHCs support programs by providing expertise in a variety of areas such as increasing staff knowledge on health issues and improving compliance with best practices.	<a href="https://ecikc.ohs.acf.hhs.gov/publication/child-care-health-consultants-make-early-care-education-programs-healthier-safer">https://ecikc.ohs.acf.hhs.gov/publication/child-care-health-consultants-make-early-care-education-programs-healthier-safer</a>
Tips for Early Care and Education Programs	Explore this tip sheet to learn how programs can partner with CCHCs to improve health and safety.	<a href="https://ecikc.ohs.acf.hhs.gov/publication/partner-cchc-improve-health-safety-tips-early-care-education-programs">https://ecikc.ohs.acf.hhs.gov/publication/partner-cchc-improve-health-safety-tips-early-care-education-programs</a>
Head Start Heals Campaign	ECE programs play a vital role in supporting the social and emotional and mental health of children and families. This support is particularly important when children and families are exposed to traumatic events or situations that overwhelm their ability to cope.	<a href="https://ecikc.ohs.acf.hhs.gov/mental-health/article/head-start-heals-campaign">https://ecikc.ohs.acf.hhs.gov/mental-health/article/head-start-heals-campaign</a>
Braiding Federal Funding to Expand Access to Quality Early Care and Education	This tool assists states and local communities in braiding, blending, or layering multiple federal funding streams (for example, Head Start and the Child Care and Development Fund) to increase the supply of quality early care and	<a href="https://aspe.hhs.gov/sites/default/files/2021-08/EC_Braiding_Toolkit.pdf">https://aspe.hhs.gov/sites/default/files/2021-08/EC_Braiding_Toolkit.pdf</a>

- **Link to letter:**  
<https://www.hhs.gov/sites/default/files/school-based-health-services-letter.pdf>
- **Link to list of resources:**  
<https://www.hhs.gov/sites/default/files/school-based-health-services-resources.pdf>



# Health Resources and Services Administration (HRSA)



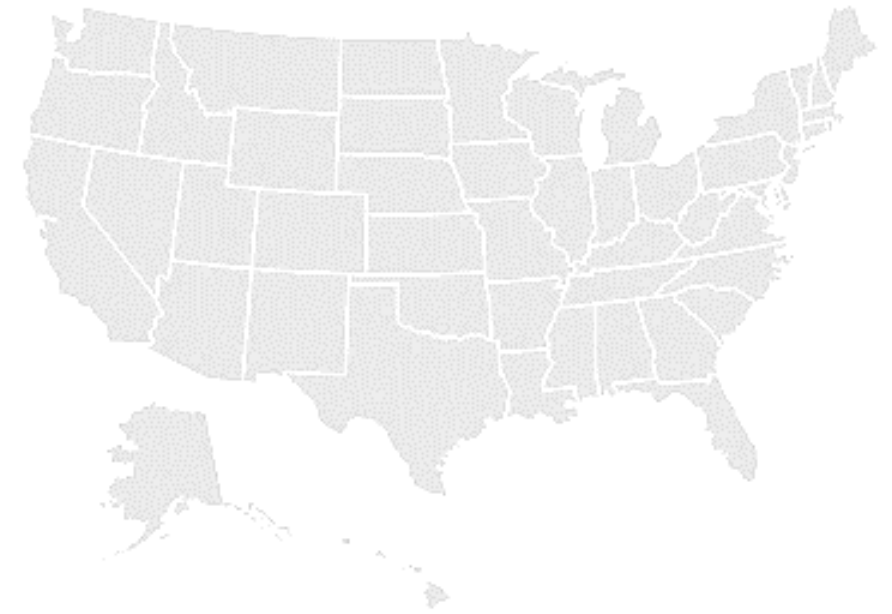
- Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically challenged
- HRSA does this through grants and cooperative agreements to more than 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities
- Every year, HRSA programs support equitable health care for those in need, serving people with low incomes, people with HIV/AIDS, pregnant people, children, parents, rural communities, transplant patients, other underserved communities, and the health workforce, system, and facilities that care for them.





# Health Center Program

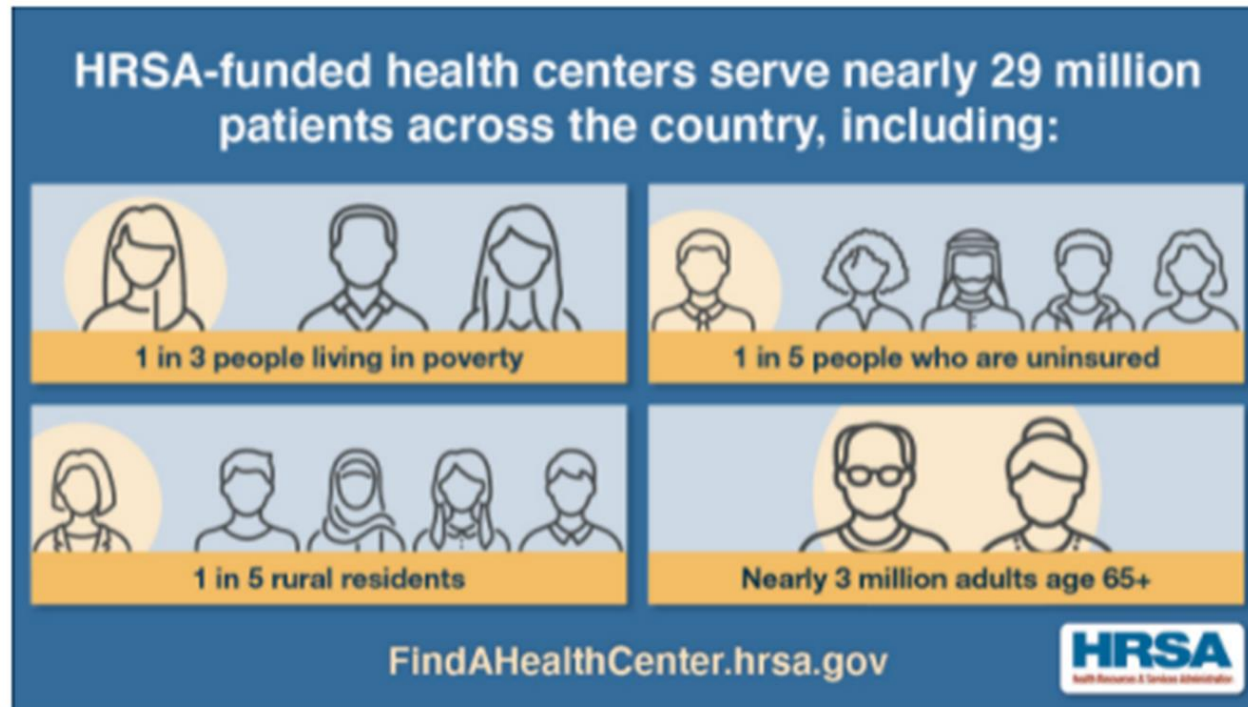
- Nearly **1,400** health centers operate **nearly 14,000** service delivery sites in every U.S. state, U.S. territory, and the District of Columbia.
- In 2020, more than **255,000 full-time staff** served nearly **29 million** patients.
- Health centers provide **patient-centered, comprehensive, integrated care** by offering a range of services:
  - Primary medical, oral, and mental health services
  - Substance use disorder and medication-assisted treatment (MAT) services
  - Enabling services such as case management, health education, and transportation



Source: Uniform Data System, 2020



# Health Center Program Fast Facts



Of the nearly 29 million patients served in 2020:

- **91%** had incomes below 200% of Federal Poverty Guidelines
- **24%** were best served in a language other than English
- **62%** were racial or ethnic minorities

Health centers served:

- Almost **1.3 million** individuals experiencing homelessness
- Nearly **1 million** agricultural workers
- More than **376,000** veterans



# Health Centers, Children and Youth, and Schools

## Children aged 17 and under

- **7.9 million** or **1 in 9** children and youth
- **976,000** COVID-19 vaccines administered

## School-based services

- **560** health centers (41%) operate one or more school-based sites
- Total of **3,200+** school-based sites
- **658,551** students served via school-based sites
- **7,600** school-based COVID-19 vaccination clinics



Source: Uniform Data System, 2020 and Health Center COVID-19 Surveys



# Health Center Program Fundamentals



## Serve High Need Areas

- Serve a high need community or population



## Patient Directed

- Private non-profit or public agency that is governed by a patient-majority community board



## Comprehensive

- Provide comprehensive primary care and enabling services (e.g., education, outreach, and transportation services)



## No One is Turned Away

- Services are available to all, with fees adjusted based upon ability to pay



## Collaborative

- Collaborate with other community providers to maximize resources and efficiencies in service delivery



## Accountable

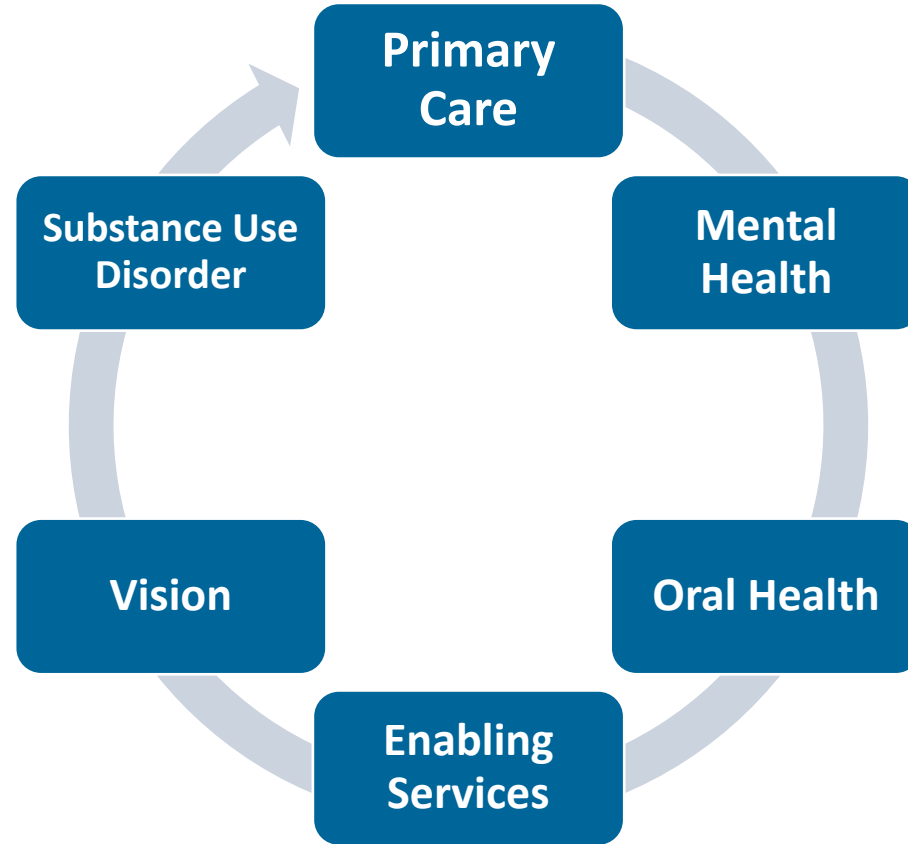
- Meet performance and accountability requirements regarding administrative, clinical, and financial operations

The Health Center Program is authorized under Section 330 of the Public Health Service (PHS) Act. Program requirements are available at <https://bphc.hrsa.gov/programrequirements>.



# High Quality, Comprehensive Care

62% of health centers provide substance use disorder (SUD) services



98% of health centers provide mental health services

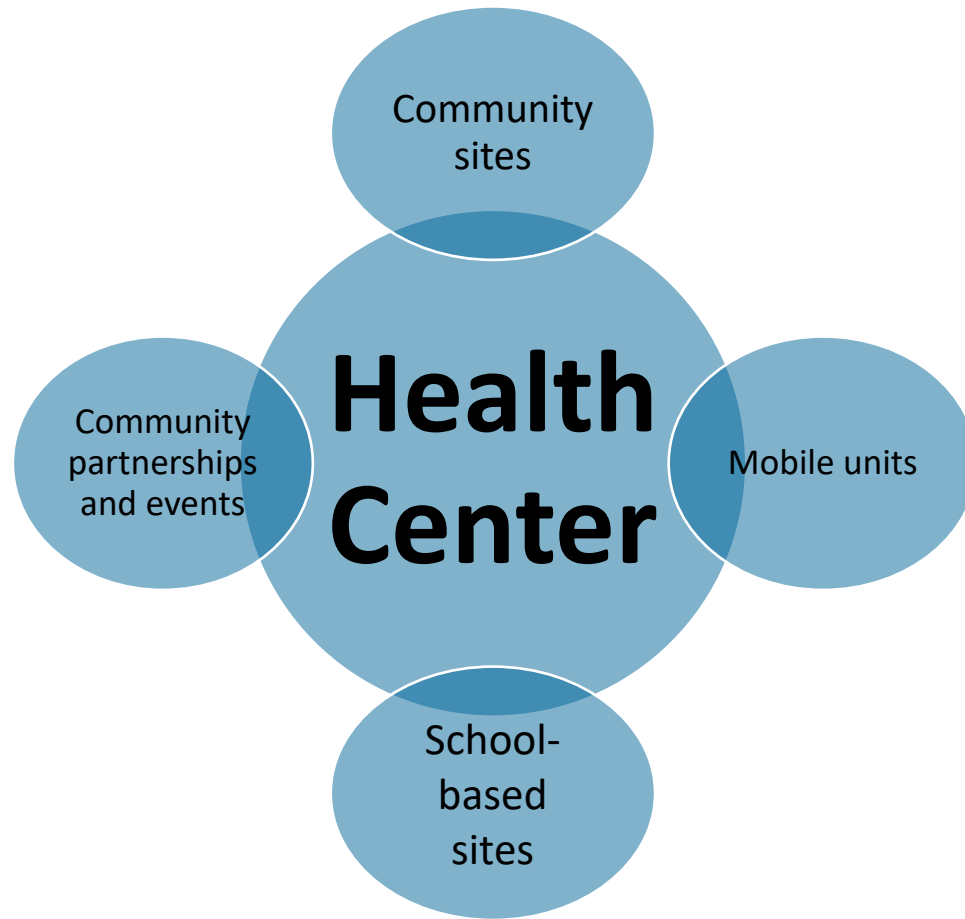
77% of health centers were recognized as **patient-centered medical homes** in 2020

Required enabling services include outreach, eligibility and enrollment assistance, health education, translation, transportation, care coordination





# Facilitating Equitable Access to Care



In person care

Virtual care

Enabling  
services

Health related  
social needs



# Services on Behalf of the Health Center

- Health center service delivery sites in schools are locations where a health center may carry out its activities.
- All health center activities (including in schools or other community settings) must be provided on behalf of the health center for the benefit of the current or proposed health center patient population, e.g.,
  - Health center providers work under the direction of the health center;
  - Health center providers deliver services in accordance with the health center's policies and procedures; and
  - The governing board retains control and authority over the activities/provision of any services.

Contact [Health Center Program Support](#) for additional details





# HRSA Resources to Support School Based Health Services: Health Center Program Funding

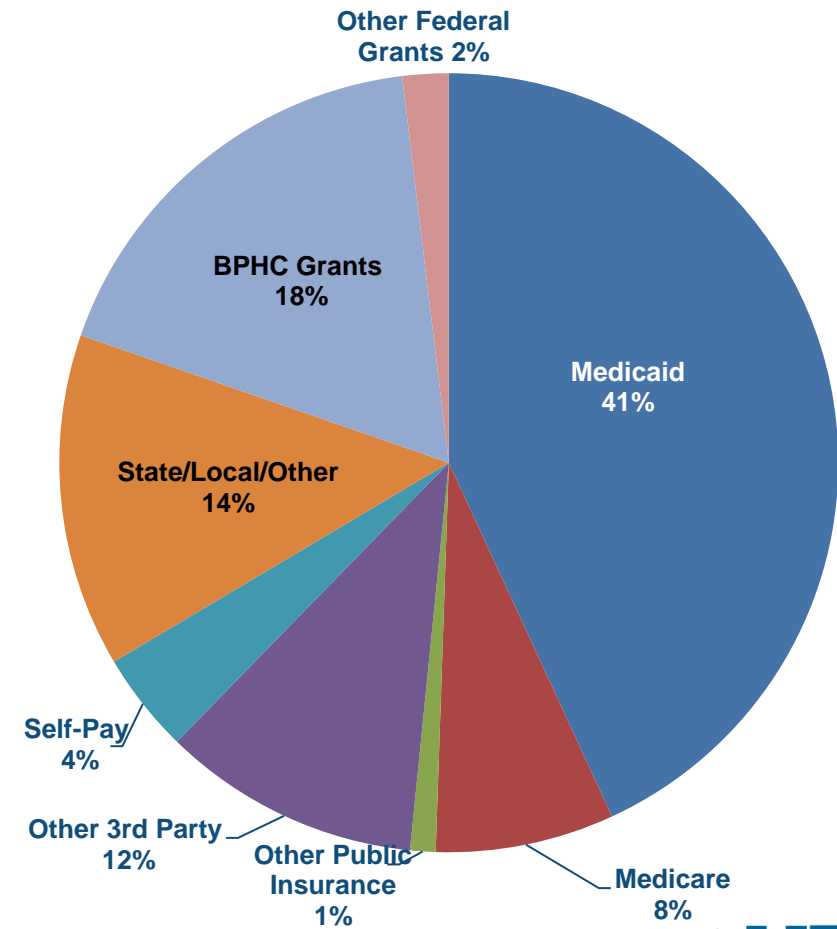
## Health Center Program Funding

- HRSA-funded health centers can request to add a school-based service site at any time. Some key criteria considered in HRSA's review include:
  - Evidence of unmet need in the proposed service area
  - Demonstration that the proposed site will complement and not duplicate existing resources
  - Collaboration with other health centers and safety net providers to benefit the proposed patient population
  - Assurance that additional funding is not needed

## Health Center Program Supplemental Funding

- HRSA awarded \$5.4 million to 27 HRSA-funded health centers through the School Based Service Sites (SBSS) funding opportunity under the Health Center Program in September 2021.
- HRSA's FY 2022 final appropriation included an additional \$25 million to fund additional SBSS applications to support approximately 125 awards.

## Health Center Revenue\* Sources (2020)



\*Does not include Provider Relief Funds



# Thank You!

**Jennifer Joseph, PhD, MEd**

**Director, Office of Policy and Program Development**

Bureau of Primary Health Care (BPHC)

Health Resources and Services Administration (HRSA)



[jjoseph@hrsa.gov](mailto:jjoseph@hrsa.gov)



[Health Center Program Support](#); 877-464-4772, 8 a.m. to 8 p.m. ET, Monday - Friday  
(except federal holidays)

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[bphc.hrsa.gov](http://bphc.hrsa.gov)



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# **School-Based Health Care: The Intersection of Health and Education**

**March 30, 2022**

**Andrea Shore, MPH**  
**Chief Program Officer**



# School-Based Health Alliance

## Transforming Health Care for Students

### Our **Focus**

The School-Based Health Alliance Works to Support & Grow SBHCs

#### Policy



Establishes and advocates for national policy priorities

#### Standards



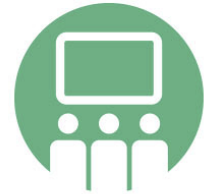
Promotes high-quality clinical practices and standards, including for telehealth

#### Data



Supports data collection and reporting, evaluation, and research

#### Training



Provides training, technical assistance, and consultation

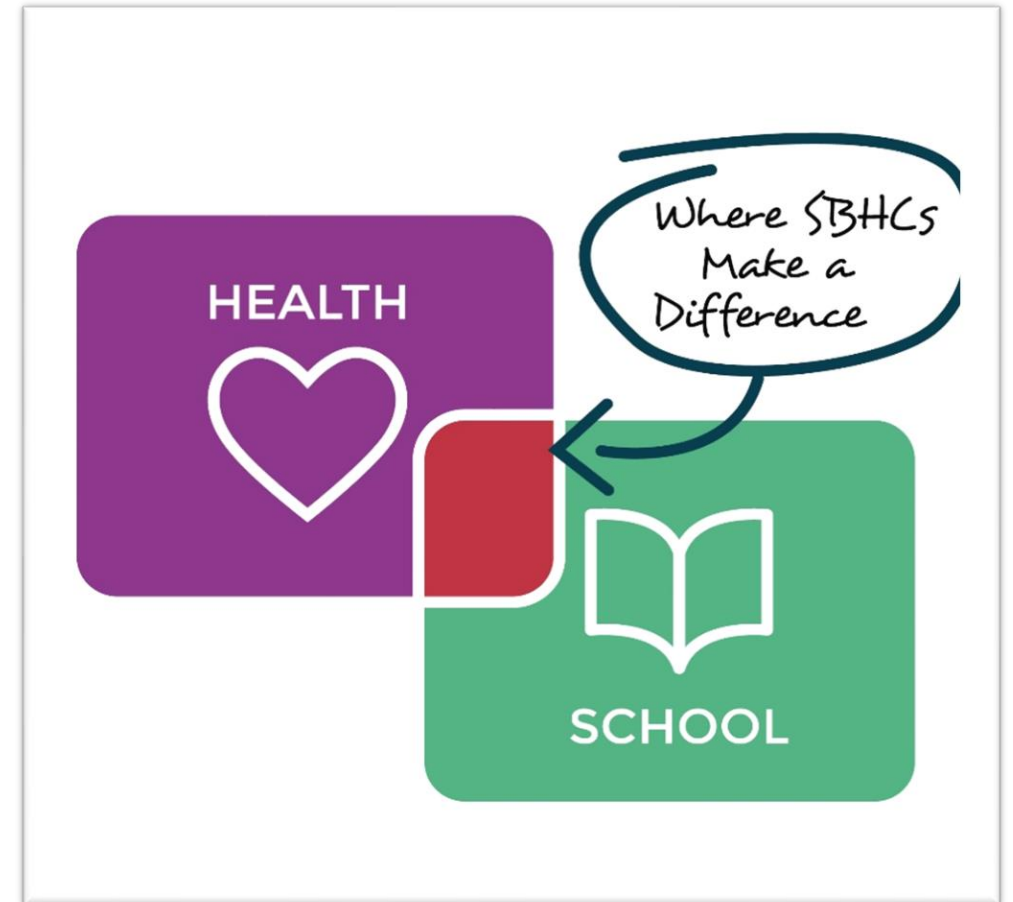
**We support the improvement of students' health via school-based health care by supporting and creating community and school partnerships**

[www.sbh4all.org](http://www.sbh4all.org)



# We Believe...

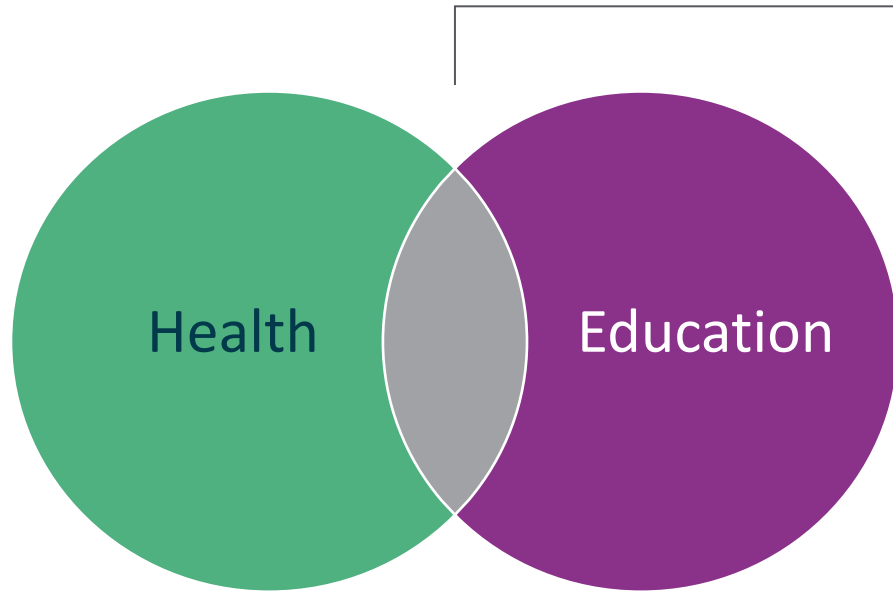
*In the transformational  
power at the intersection  
of health and education*





# School-Based Health Services

## Types of Services

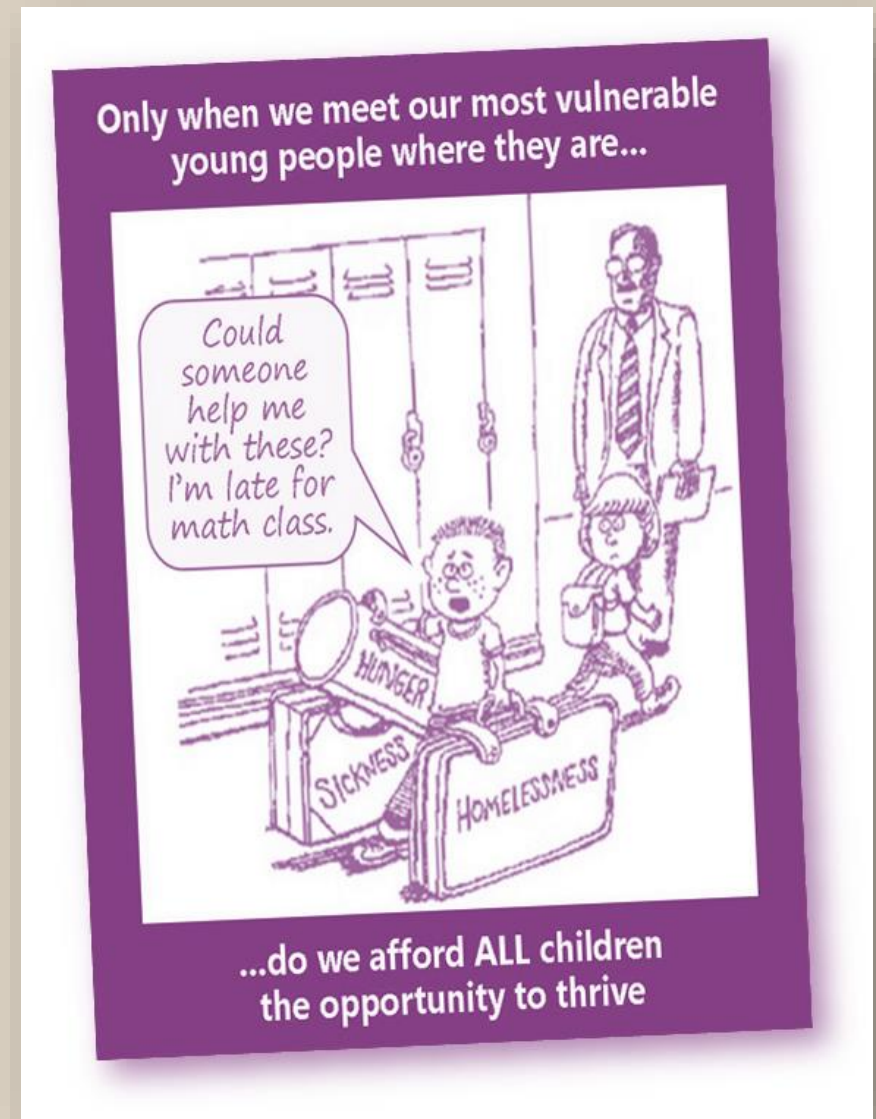


- School nurses
- School psychologists
- School counselors
- School social workers
- Health educators
- Nutritionists
- School-based health care/school-based health centers





# Why School-Based Health Care?



Artist: Scott Spencer





## School-Based Health Care

- **Primary Care**
  - ✓ Preventive services
  - ✓ Acute and chronic care
  - ✓ Immunizations
- **Oral Health**
- **Vision Services**
- **Behavioral and mental health**
  - ✓ Screening, assessment, and early intervention
  - ✓ Group and individual counseling





# School-Based Health Center Defined

- Shared commitment between a school, community, and health care organization(s) working with students and families
- Support students' health, well-being, and academic success by providing an array of services such as:
  - Medical
  - Mental health/ Behavioral counseling
  - Oral Health Care
  - Vision Care
- Works with existing school services and care providers but does not replace







# The Community Guide

## Evidence-Based Approaches and Recommendations



### School-Based Health Centers



#### Community Preventive Services Task Force Recommendation

The Community Preventive Services Task Force recommends the implementation and maintenance of school-based health centers (SBHCs) in low-income communities to improve educational and health outcomes.

#### Facts about Health and Racial and Ethnic Minority Children

Children from low-income and racial and ethnic minority populations in the United States commonly experience worse health, are less likely to have a usual place of health care, and

miss more days of school because of illness than do children from less economically and socially disadvantaged populations.<sup>1</sup>

They are also more likely to be hungry and have problems with vision, oral health, or hearing.<sup>1</sup> SBHCs can help address these obstacles, which can be critical to students' education and long-term health.

### Health Equity

School-Based Health Centers: recommends the implementation and maintenance of School-Based Health Centers in low-income communities to improve educational and health outcomes.

### Vaccination Programs

Schools and Organized Child Care Centers: strong evidence of effectiveness in increasing vaccination rates and decreasing rates of vaccine-preventable disease and associated morbidity and mortality.





# Health Centers...

Help students and their families overcome access barriers



TRANSPORTATION



TIME



LANGUAGE



FINANCIAL  
BARRIERS





## Education Partner Contributions

- Space in school
- Access to IT
- Cleaning services
- Security
- Utilities
- Staff support for the health services
- Marketing platforms like school website, Facebook
- Bi-directional consent/FERPA

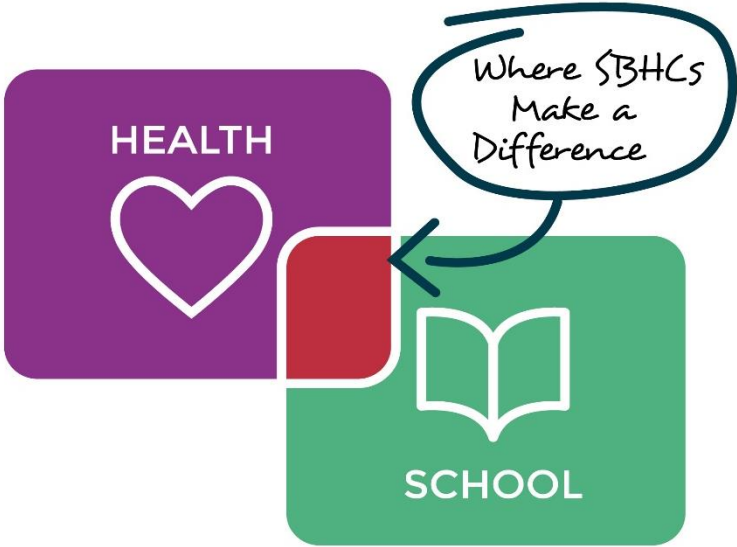
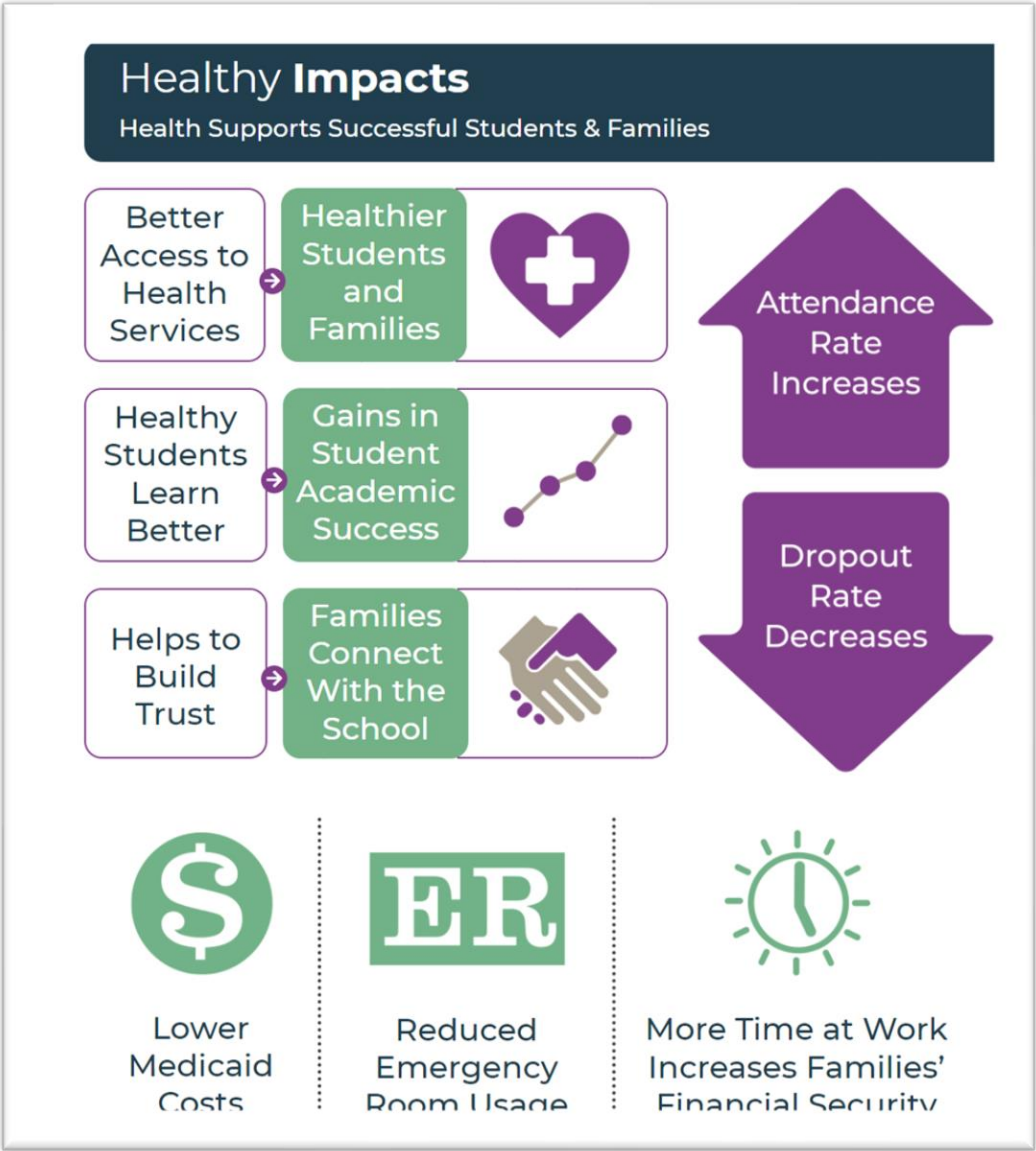
## Health Center Partner Contributions

- Clinicians and other staff
- Equipment
- Electronic health records
- Coding and billing capability
- Lab services
- Marketing and enrollment efforts
- Bi-directional consent/HIPAA





# Working together we can . . .



*In the transformational power of the health and education intersection*





# THANK YOU!

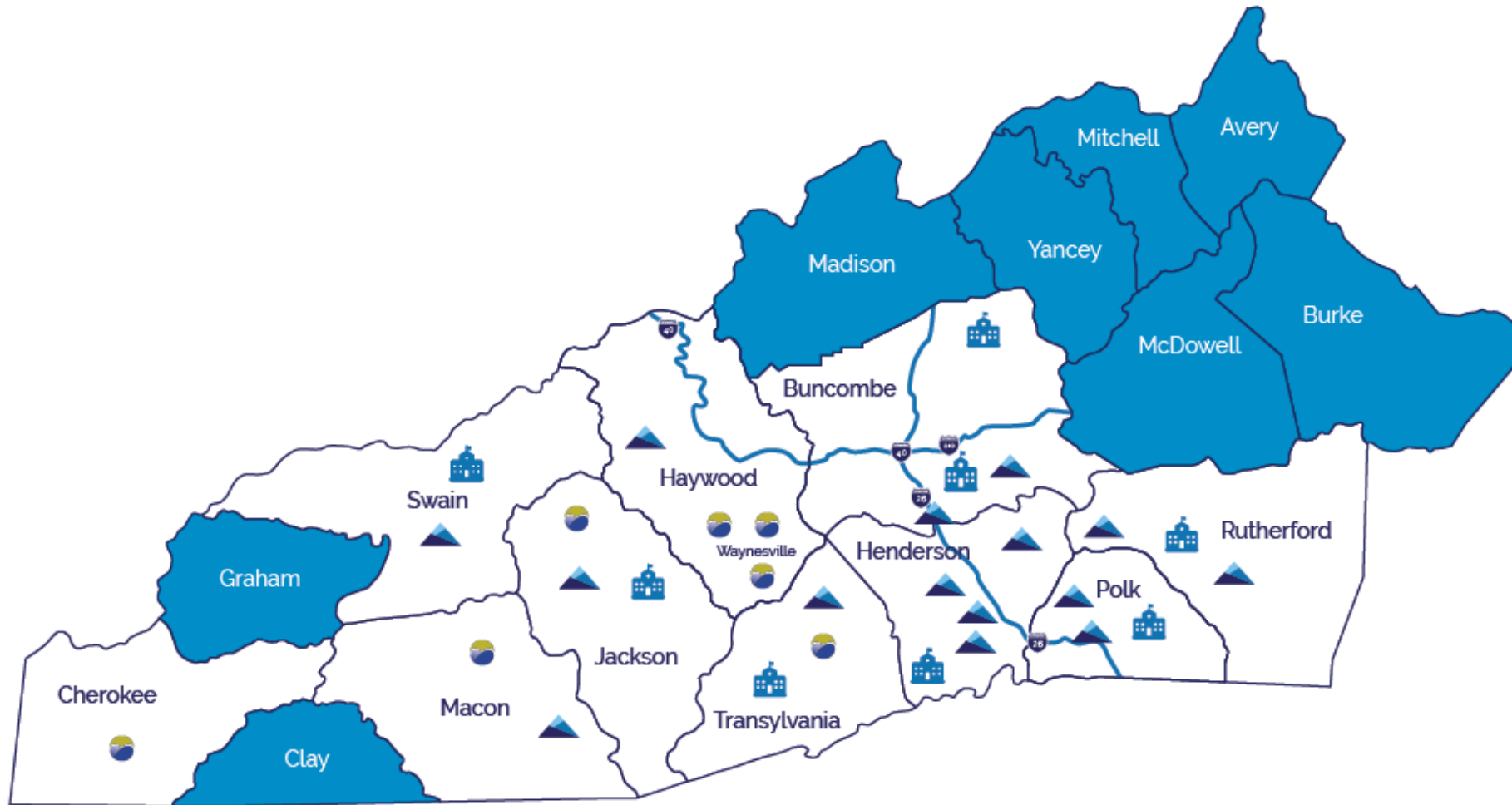
Additional Questions? Contact us at:

[info@sbh4all.org](mailto:info@sbh4all.org) or [ashore@sbh4all.org](mailto:ashore@sbh4all.org)





# Case Example 1: Blue Ridge Community Health Services – Western North Carolina





# BRCHS Health Center School-Based Service Sites

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- **7 county service area in Western North Carolina**
- **Sites provide a combination of:**
  - Physical, comprehensive services
  - School-linked services
  - Telehealth services
  - Tele-mental health services
  - Behavioral health only sites



# How Did We Get Started?

- Blue Ridge Health has utilized a school-based health services model of care since 1996.
  - Original funding came through 330 grant programs.
- In 2022, we are now providing services in a 7-county area with 30+ school-based service sites and we are continuing to grow.
  - This growth is due to being responsive to school needs and providing support in those communities with the highest needs.
- We determined needed staffing models over time.
- We relied on start-up funding for our first 2-3 years until the school-based health services model of care became sustainable through billing.



# Leveraging Our Health Center Infrastructure



- Financial modeling - Our school-based health model of care becomes sustainable after around 2-3 years with outpatient billing structure (PPS rate).
- We applied for HRSA grant opportunities.
- We link students and families to additional primary care, dental, and specialty services (pediatric neurology & pediatric psychiatry) provided by the health center.
- Behavioral health counseling can be completed at the school, pediatrics office, or behavioral health offices (integrated or co-located with our health center).
- If a family prefers tele-mental health, we continue to provide a hybrid model between school and home.



# What Happens After COVID?/Behavioral Health Needs



- Continue to support COVID-19 testing and vaccinations/boosters.
- Assist with student Well Child Care, immunization needs, and other missed care during COVID-19.
- Work in collaboration with other agencies for behavioral health needs and services (there's enough for everyone).
- Continue offering flexibility for behavioral health counseling services.
  - Hybrid model between school and home
- Continue to assess needs in partnership with schools and communities – Crisis support services with HCPS.



# Beyond COVID – Challenging Behavioral Health Needs



- Continue to assess needs in partnership with schools and communities:
  - Crisis support services
  - Responding to student, family, and community needs
  - Form new partnerships and engage in new initiatives
  - Build procedures and protocols
  - Support students & staff at the whole school, Tier 1 level
- Work in collaboration with other agencies for behavioral health needs and services (there's enough for everyone).





## Case Example 2: Cabin Creek Health Systems

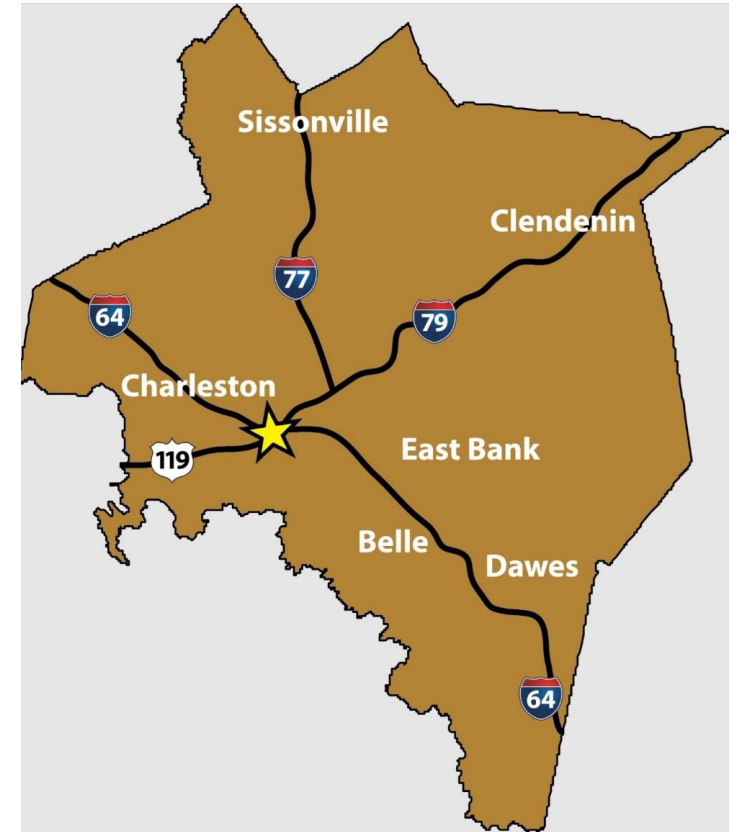
**West Virginia**





# Our Health Center School-based Services Story

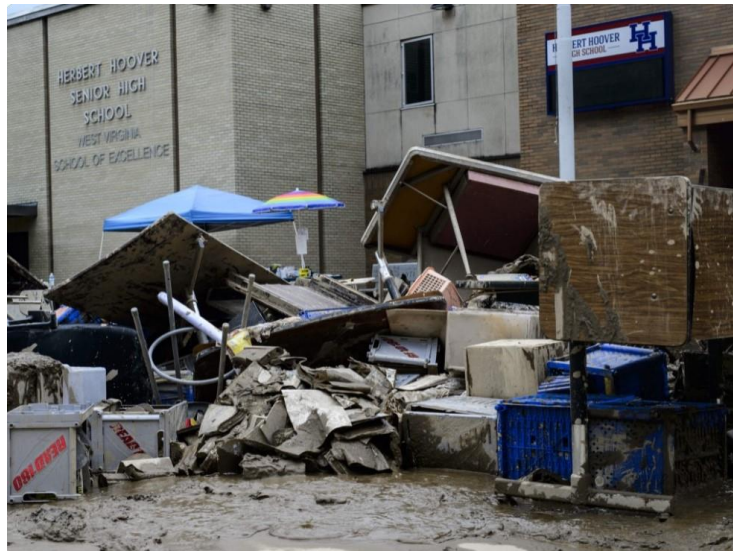
- Started services in 2001 as dual community and school-based health site: Riverside High School.
- Expanded to elementary, middle, and other high school sites.
  - Currently servicing WV's largest county and capital city
  - 3 high schools, 3 middle schools, 3 elementary schools in 3 “feeder school” clusters
  - Planned expansion in elementary schools in all clusters





# Resiliency Training In Action

- Funding sources include local and federal grant applications.
- Integrated primary care and behavioral health care:
  - Traditional in person access
  - Emerging tele-health expanded access
  - Hybrid model → “wrap around” coverage





# Why Is This Work Important?

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- Rural population with increased risk of:
  - Grandparents-as-parents
  - Transient care
  - Kinship care
  - Opioid epidemic
- Integration of social services, behavioral health services, and partnered assessment of social determinants of health in high-risk populations
- Increased support for vulnerable populations of health:
  - LGBTQIA+
  - Very low socioeconomic status
  - Low health literacy





# Mission In Real Time

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- **Elementary Schools**
  - Access to acute and primary preventative care
  - Navigating services
  - Health literacy
- **Middle Schools**
  - Continue health literacy
  - Maintain cooperative role with school counselors
  - Early identification of increased risk populations
    - ✓ Utilization of ACE scores
    - ✓ Trauma history
    - ✓ Substance use disorder screening/education/prevention
    - ✓ Nicotine use disorder screening/education/prevention





# Mission In Real Time, Cont.

- Middle Schools, continued
  - Behavioral Health coverage and implementation of services
    - ✓ Yoga
    - ✓ “Smoothie Tuesday”
    - ✓ Navigation of food distribution outside of school hours





# Mission In Real Time, Cont.

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- **High Schools**
  - Integrated partnerships with administration → communication of services
  - Pre-COVID weekly huddle with PCPs, BH, truancy officer, school RN
    - ✓ Identify and make follow up plan for high-risk students
- **Supportive atmosphere**
  - Trans-medicine gender affirming care → decreased lifetime risk of suicidal ideation in trans youth
- **BHP/school counselor partnership**
  - Creation of “safe spaces room”
    - ✓ Sensory and mindfulness room → COVID associated funds





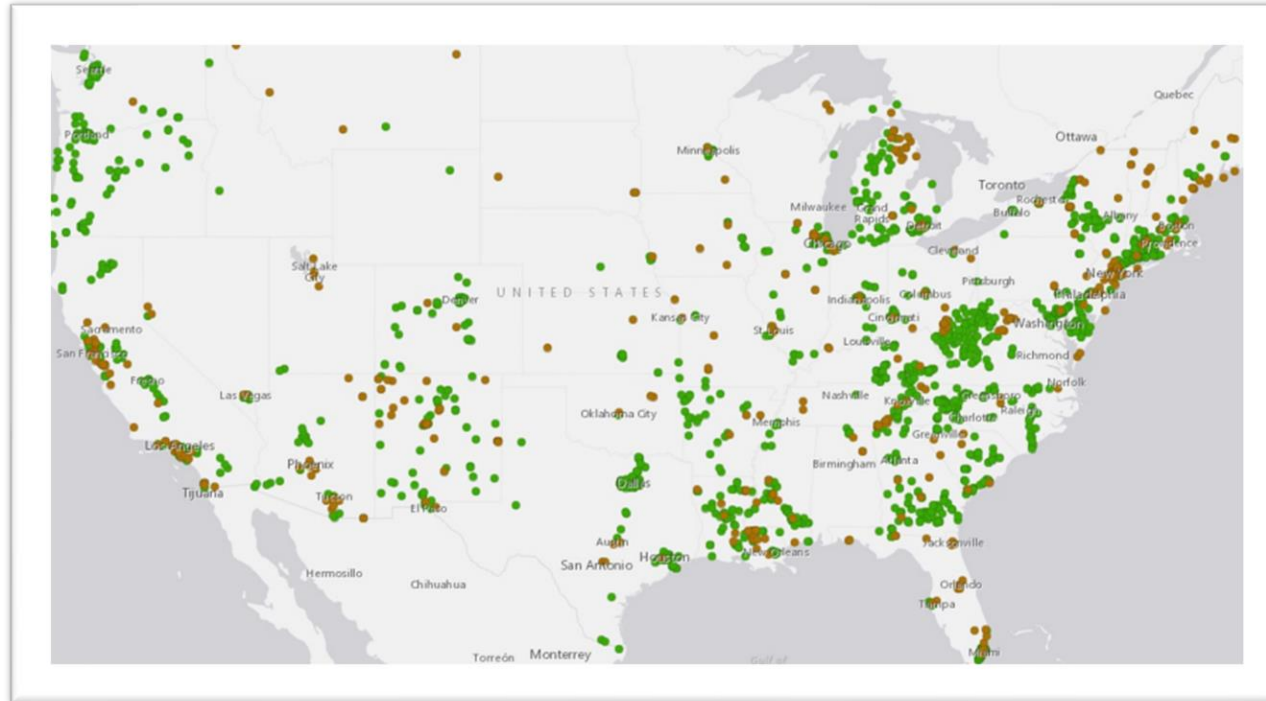
# COVID Onward

- **Community drives for COVID vaccination in the school-based setting**
  - Partnership with local Health Department to fill needs in schools without existing SBHC
- **Identifying gaps in coverage/care**
  - Immunization, well visits → population of health manager
- **Recruitment/Retention**
  - Strengthening existing school partnerships
  - Behavioral Health coverage as linkage to care
  - Continual conversation with local schools





# Children's Health and Education Mapping Tool



The School-Based Health Alliance's Children's Health and Education Mapping Tool is a free, interactive resource for individuals seeking to address chronic inequities among low income children and adolescents.



# School-Based Vaccination Resources:

## ADVANCING HEALTH CENTER & SCHOOL PARTNERSHIPS to Improve COVID-19 Vaccination Administration for Children and Adolescents



UPDATED DECEMBER 2021

### Why Schools?

**Administration of COVID-19 vaccines is essential to pediatric and adolescent health and the health of our nation.** Vaccinating the nation's vulnerable and underserved youth is a priority of the Health Resources and Services Administration (HRSA), the National Association of Community Health Centers (NACHC), and the School-Based Health Alliance (SBHA). Serving more than 29 million patients across the country, health centers play a critical role in achieving this goal. Health centers offer a broad array of primary, behavioral health, and preventive care services. They serve the most vulnerable patients and reduce barriers such as cost and lack of insurance. Too many children experience persistent disparities in health care access, quality, and outcomes. By partnering with schools to administer COVID-19 vaccinations to children and adolescents, health centers can improve access to care, particularly for children and adolescents

### Included topics:

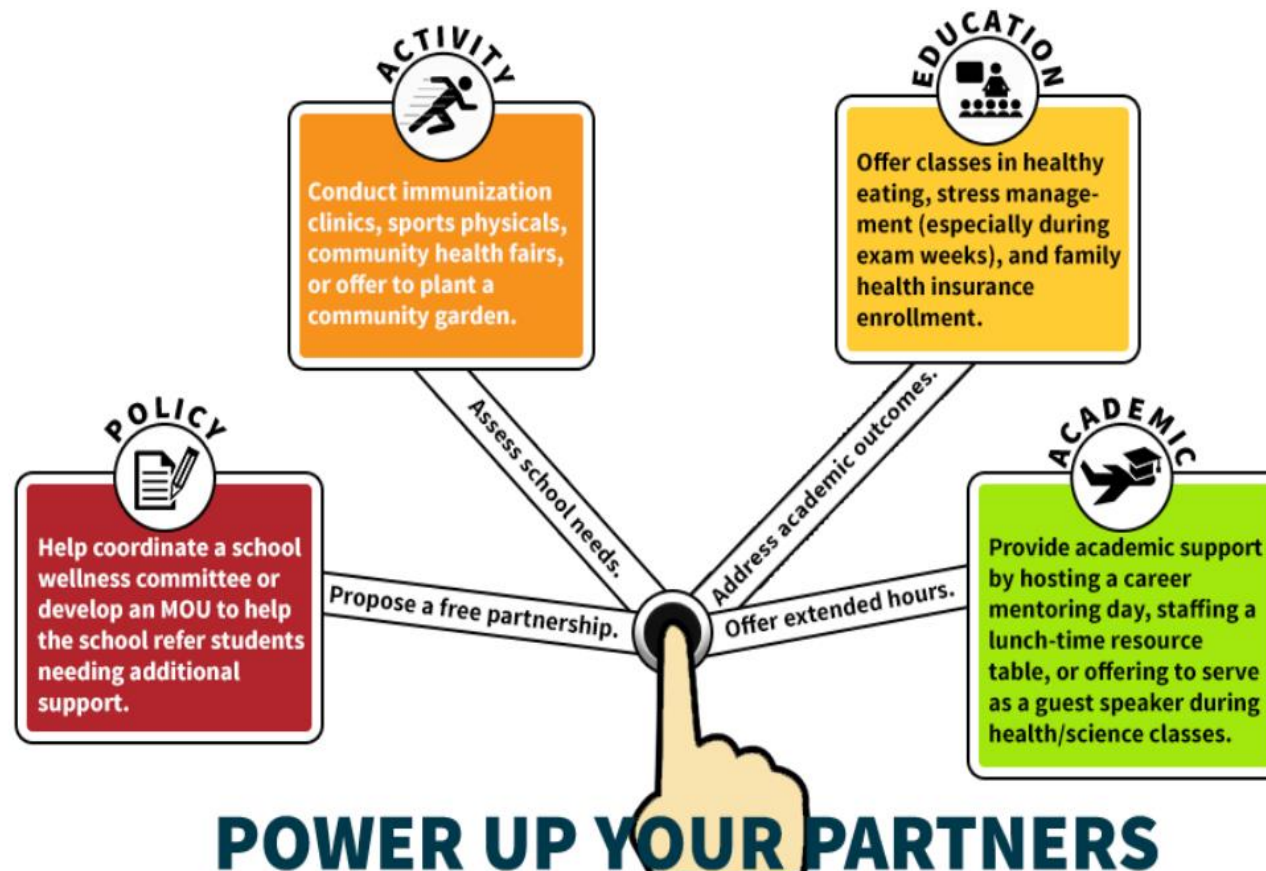
- Why Schools
- Identify Contacts to Approach
- Planning Steps
- Staffing Resources
- Communications, Building Trust, and Recruitment
- Operations and Implementation Planning
- Opportunities
- Sample Resources from Health Centers and Schools



# Health Centers and Schools: Uniting for Young People's Success

## HEALTH CENTERS AND SCHOOLS: UNITING FOR YOUNG PEOPLE'S SUCCESS

Getting Started Infographic



Powering up a partnership in your community can seem like a big task — but it doesn't have to be! Try out some of these ideas for ways to get started and important tips to keep in mind



## School-Based Health Center (SBHC) Planning Checklist



- ✓ Establish SBHC regional planning committee
- ✓ Orient SBHC planning committee to the SBHC model
- ✓ Identify a medical sponsor organization and other potential health care provider partner organizations
- ✓ Visit existing SBHC(s)
- ✓ Establish SBHC advisory group (e.g. principal, other school leadership, school social worker, students, parents/guardians, school nurse, sponsor organization member, and others.)
- ✓ Conduct community readiness assessment
- ✓ Conduct SBHC needs assessment
- ✓ Develop and implement marketing and engagement plan for target audiences and gatekeepers
- ✓ Identify potential SBHC location(s) via site visit(s) Select a well-considered location for the SBHC based on readiness assessment, needs assessment, site visit(s), and needed construction/renovation
- ✓ Determine appropriate staffing
- ✓ Develop narrative business plan



### Consulting Services

The School-Based Health Alliance is a highly respected provider of extensive technical assistance and training to the school-based health care field. Our school health consulting staff has decades of experience in designing, operating, and evaluating school-based health center (SBHC) programs. Let us put that expertise to work for you!

- ✓ Complete a pro-forma business plan to determine funding needs and potential revenue
- ✓ Solicit capital and operational funding from variety of sources
- ✓ Develop necessary agreements and procedures to bill commercial and public insurance
- ✓ Draft and execute a memorandum of understanding among SBHC partners (e.g. school district, medical sponsor organization, behavioral health, oral health, local department of health.)
- ✓ Develop comprehensive SBHC consent form that includes bi-directional information sharing to promote continuum of care (e.g. school nurse, school counselor, PCP, dentist, parent/guardian.)
- ✓ Complete SBHC renovation/construction process
- ✓ Engage students to ensure SBHC space is student-friendly
- ✓ Purchase appropriate equipment and supplies
- ✓ Ensure appropriate technology access in collaboration with school



# School Nursing & School-Based Health Centers in the United States

## Working Together for Student Success



School nurses and school-based health centers working together share a critical mission: **protecting and advancing the health and well-being of our nation's school-age children.** One does not replace the need for the other. Each has a distinct and complementary function.

### What happens when school nurses and school-based health centers work together?

- Students' health, overall well-being, and academic success improve.<sup>1</sup>
- Students acquire the health knowledge and skills they need to become independent in providing self-care.
- School absence rates decrease and graduation rates increase.<sup>2</sup>
- Student access to equitable health care increases, including health promotion, disease prevention, and illness management.
- Continuity of care occurs when health professionals coordinate with each other about student health needs. This frees educators to focus on teaching and allows parents/caregivers to remain at work.<sup>3</sup>

### School-Based Health Centers

Bring a multidisciplinary healthcare team from local health organizations to provide an array of services to the school, in person and/or via telehealth, which may include:

- Primary care
- Prevention and early intervention
- Behavioral health counseling
- Oral health services
- Health education and nutrition counseling
- Lab work and prescriptions

Represent a shared commitment between schools and healthcare organizations to support the health, well-being, and academic success of students.<sup>4</sup>

Partner with school nurses to increase access to healthcare services that help students succeed in school and life.

Create a culture of health within the school community to include students, families, and school staff.

Are recommended by the CDC Community Preventive Services Task Force as an evidence-based intervention to address disparities in health and education outcomes.

Provide access to 6.6 million K-12 students (13%) from more than 2,500 school-based health centers in approximately 10,500 (10%) of public schools.<sup>5</sup>

Are typically funded by:

- Healthcare systems
- Grants (public and private)
- Insurance reimbursement

Learn more at [www.sbh4all.org](http://www.sbh4all.org)

### School Nurses

Bring a multidisciplinary healthcare team from local health organizations to provide an array of services to the school, in person and/or via telehealth, which may include:

- identifying and addressing mental health issues
- leveling the field on health disparities and promoting healthy behaviors
- enrolling children in health insurance and connecting families to healthcare providers
- handling medical emergencies.<sup>6</sup>

Advocate for equitable, student-centered school health policies, programs, and procedures.

Lead the school health services team to address actual or potential barriers to student health and academic success.

- Develop, implement, and evaluate a student's individualized healthcare plan and emergency care plan.
- Collaborate with health and education leaders to design systems that allow students and school communities to develop their full potential.

Serve as public health sentinels within and across school populations:

- Monitor for symptoms of disease
- Screen for early detection of conditions that can lead to adverse health and academic outcomes.
- Mitigate potential health issues and school emergencies.

Provide access to individual students and entire school population; more than 95,000 nurses are employed full time in 39.3% of schools.<sup>7</sup>

Are typically employed by schools and districts, and paid with regular or special education funds.<sup>8</sup>

Learn more at [www.nasn.org](http://www.nasn.org)

### Why should schools have both a school nurse and a school-based health center?

School nurses and school-based health centers assume leadership roles to advocate for healthcare & education reform, which includes funding and reimbursement, policy development/implementation, as well as a uniform data set.

Communication that is reciprocal and respectful helps to ensure continuity of healthcare services inside and outside the school setting. This allows both the school nurse and the School Based Health Center to work together toward a common health goal for the student.

School nurses and school-based health centers coordinate care, thus providing the best student-centered care possible, and ensuring the student is healthy, safe, and ready to learn.

School nurses and school-based health centers work collaboratively to address both social needs and to advocate as partners for systems level changes to help alleviate social determinants to health and their causes. The "social determinants of health" refers to the conditions in which people are born, live, learn, play, work, age, and worship, as well as what kind of access they have to healthcare services. Together these affect a wide range of health functions and overall quality-of-life outcomes.



## What Are School-Based Health Clinics?

Schools provide health care in many ways, from nurses' offices for routine health needs to professionally equipped school-based health clinics staffed by trained medical professionals.

More and more schools are offering these school-based health clinics to students. Because regular physician's offices may only be open during school or work hours, parents may be forced to choose between missing school and/or work and seeking care. Also, transportation to an outside office can be difficult. School-based clinics help busy parents get their children medical care and avoid student absences. The best school-based clinics provide quality health care as a comprehensive medical home to students in the location most accessible to them. Trained school nurses, physicians, and psychologists keep children healthy and ready to learn.

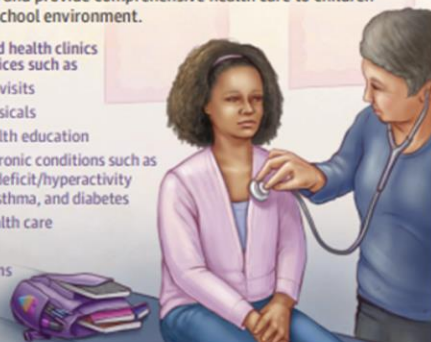
There are many benefits of school-based clinics. School clinics offer prevention and screening services to students, and students can access well-child visits, sports physicals, sexual health education, sick visits, and vaccinations. These clinics can also spot and treat mental health concerns, even with same-day appointments. Students with chronic conditions such as asthma, attention-deficit/hyperactivity disorder, and diabetes can be cared for in the school environment, often with input from teachers who know them well. Some students and families may worry about the privacy of care when they see a clinician at school, and parents should make sure these clinics uphold the highest privacy and confidentiality as in a standard physician's office setting. School clinics can increase access to health care overall for children. The location and availability of health care services makes it possible to address a wide range of needs and populations. School-based clinic visits are easier to fit into a busy schedule, which results in fewer absences from classes. Students can stay on track better with their academics because they do not have to leave school to attend a physician's appointment. School-based vaccination programs provide a safe and efficient way to vaccinate children. This is important because vaccines help keep children safe from getting sick in the school environment and prevent children from bringing sickness home to their families.

Students may want to go to the clinic without their parent. Because policies around these visits vary state by state, it is encouraged to research your local policies about services that can be provided to students without the parent present. However, parental involvement in school health activities is very important for promoting healthy behaviors and managing chronic conditions. Caregiver engagement with school health programs can help connect clinic staff with community resources. Additionally, parental involvement enhances teacher and school staff awareness about caring for children with chronic illnesses. This supports a healthy lifestyle at home and in school.

School-based health clinics are staffed by trained medical professionals and provide comprehensive health care to children within their school environment.

School-based health clinics provide services such as

- Well-child visits
- Sports physicals
- Sexual health education
- Care for chronic conditions such as attention-deficit/hyperactivity disorder, asthma, and diabetes
- Mental health care
- Sick visits
- Vaccinations



Policy regarding parental involvement in student visits to a school-based clinic vary by state. Parental involvement can complement this care by promoting healthy behaviors and managing chronic conditions.

### For More Information

US Centers for Disease Control and Prevention

<https://www.cdc.gov/healthyschools/schoolhealthservices.htm>

[https://www.cdc.gov/healthyschools/parentengagement/pdf/parent\\_engagement\\_strategies.pdf](https://www.cdc.gov/healthyschools/parentengagement/pdf/parent_engagement_strategies.pdf)

American Academy of Pediatrics

<https://publications.aap.org/pediatrics/article/144/2/MeetingAbstract/166/3220/School-Health-A-Model-for-Improving-Access-to-Care>

[https://publications.aap.org/pediatrics/article-abstract/129/Supplement\\_2/S81/32178/Promising-Practices-for-School-located-Vaccination?fulltext](https://publications.aap.org/pediatrics/article-abstract/129/Supplement_2/S81/32178/Promising-Practices-for-School-located-Vaccination?fulltext)

School-based health programs provide preventive services, early diagnosis and treatment, risk assessments, vaccinations, and more. Health concerns can be addressed across broader populations of students, especially those with limited access to health care. School-based clinics improve the health of children by providing an easy and efficient way for families to access health care. The goal of school clinics is to keep students healthy, in school, and able to achieve their full potential.

## JAMA Online Pediatric Patient Education Article



# Two Virtual Workshops for Health Centers Interested in School-Based Care

Hosted by the *National Association of Community Health Centers and School-Based Health Alliance*

## Workshop 1: School & Health Partnerships

April 7, 2022  
2:00 – 4:00 PM ET

## Workshop 2: Do School-Based Health Center Models Expand Your Community Reach? Yes! Come Learn the Recipes for Success

May 17, 2022  
2:00 – 5:00 PM ET



Click here for more information  
and to register:

<https://bit.ly/3HJcBQX>





# SAFER SCHOOLS AND CAMPUSES BEST PRACTICES CLEARINGHOUSE

Q and A





# Feedback Form



## [NCSSLE] 2022 - Lessons from the Field - Expanding School-Health Center Partnerships

Thank you for attending the webinar, *Expanding School-Health Center Partnerships*, on March 30, 2022. To best serve you, we would greatly appreciate receiving your feedback on the webinar.

1. Prior to the webinar, how knowledgeable were you about the webinar's topic?

- ☐ Not At All Knowledgeable
- ☐ Somewhat Knowledgeable
- ☐ Very Knowledgeable

2. Overall this webinar was a good use of my time.

- ☐ Strongly Disagree
- ☐ Somewhat Disagree
- ☐ Somewhat Agree
- ☐ Strongly Agree

3. This webinar improved my understanding of the covered topic.

- ☐ Strongly Disagree
- ☐ Somewhat Disagree
- ☐ Somewhat Agree
- ☐ Strongly Agree

[HTTPS://WWW.SURVEYMONKEY.  
COM/R/LFTF\\_SESSION21](https://www.surveymonkey.com/r/LFTF_SESSION21)



# Thank You!

Should you have any questions, please contact us at [NCSSLE@air.org](mailto:NCSSLE@air.org) or 800-258-8413. We are happy to help!

NCSSLE Website

<https://safesupportivelearning.ed.gov>

Best Practices Clearinghouse

<https://bestpracticesclearinghouse.ed.gov/>

**Next Lessons from the Field Webinar: April 13, 2022**